| POSITION | INITIALS | ☐. NO. | DATE |
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| | | | |
| FEE DETERMINATION | E·H | | 08-21-01 |
| O.I.P.E. CLASSIFIER | | 48 | 8/30/01 |
| FORMALITY REVIEW | H-S | 866 | 09-21-01 |
| RESPONSE FORMALITY REVIEW | | | |

## INDEX OF CLAIMS

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| ✔ | Rejected | | N | | Non-elected |
| = | Allowed | | I | | Interference |
| — | (Through numeral)... Canceled | | A | | Appeal |
| ÷ | Restricted | | O | | Objected |

| Claim | | Date | Claim | | Date | Claim | | Date |
|---|---|---|---|---|---|---|---|---|
| Final | Original | | Final | Original | | Final | Original | |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)